#### PAGE 1/2 SECRETARY OF THE SENATE

## FEC FORM 2 STATEMENT OF CANDIDACY

14 MAY - 1 AM 10: 55

1. (a) Name of Candidate (in full)				
Ms. Shelley Moore Capito				
(b) Address (number and street) 2 Comstock PI	☐ Check if address changed		Candidate's FEC Identification Number     S4WV00159	
(c) City, State, and ZIP Code			3. Is This New Amended	
Charleston	WV 25	314	Statement X (N) OR (A)	
4. Party Affiliation	5. Office Sought	6. State & Dist	trict of Candidate	
REPUBLICAN PARTY	Senate	wv		
DE	ESIGNATION OF PRINCIPA	L CAMPAIGI	N COMMITTEE	
7. I hereby designate the following na	med political committee as my Princip	al Campaign Com	mittee for the 2014 election(s).	
NOTE: This designation should be	filed with the appropriate office listed i	n the instructions.	(your or oldstorry	
(a) Name of Committee (in full)				
Capito For West Vi	rginia			
(b) Address (number and street) P.O. Box 11519				
(c) City, State, and ZiP Code			<del></del>	
Charleston		wv	25339	
candidacy.  NOTE: This designation should be	filed with the principal campaign comn	nittee.	·	
(a) Name of Committee (in full)  Capito Victory Com	mittee			
(b) Address (number and street) 228 S Washington St			· · · · · · · · · · · · · · · · · · ·	
Ste 115				
(c) City, State, and ZIP Code		<u> </u>		
Alexandria		VA	22314	
I certify that I have ex	amined this Statement and to the best	of my knowledge a	and belief it is true, correct and complete.	
Signature of Candidate		<u> </u>	Date	
Ms. Shelley Moore Canito				
Shelly >	houre Capeto		05/01/2014	
<del>-</del>		ct the person signi	ng this Statement to penalties of 2 U.S.C. §437g.	
			FEC FORM 2 (REV. 02/2009	

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### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 /
	F OTHER AUTHORIZED COMMITT ding Joint Fundraising Representatives)	EES [ADDITIONAL]
I hereby authorize the following named committee, which is NO randidacy.	T my principal campaign committee, to r and	expend funds on behalf of my
NOTE:This designation should be filed with the princi	ipal campaign committee.	
(a) Name of Committee (in full)		
Fiscal Conservative Majority Fun	nd	
(b) Address (number and street) 228 S Washington St Ste 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314	4
	F OTHER AUTHORIZED COMMITT ding Joint Fundraising Representatives)	EES [ADDITIONAL]
I hereby authorize the following named committee, which is NO candidacy.	T my principal campaign committee, to receive and	expend funds on behalf of my
NOTE:This designation should be filed with the princi	ipal campaign committee.	
(a) Name of Committee (in full)		
2014 Senators Classic Committe	ee	
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		*****
Alexandria	VA 22314	
	F OTHER AUTHORIZED COMMITT ding Joint Fundraising Representatives)	EES [ADDITIONAL]
I hereby authorize the following named committee, which is NOT randidacy.	T my principal campaign committee, to r and a	expend funds on behalf of my
NOTE:This designation should be filed with the princi	ipal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		· · · · · · · · · · · · · · · · · · ·
(c) City, State and ZIP Code		

# 14020340025

## United States Senate

OFFICE OF THE SECRETARY

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DANA K MECALLUM SUTERINTENDENT

HART SENATE OFFICE BL SUITE 232 WASHINGTON, DC 20510-71 PHONE (202) 224-0322

DATE PREPARED 5-1-14



